

INDEPENDENT REVIEWERS OF TEXAS, INC.

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[Date notice sent to all parties]:

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IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE: Open Stabilization of Chronic Sterno-Clavicular Dislocation

A DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION:

Board Certified Orthopedic Surgeon

REVIEW OUTCOME:

Upon independent review, the reviewer finds that the previous adverse determination/adverse determinations should be:

X Overturned (Disagree)

Provide a description of the review outcome that clearly states whether medical necessity exists for each of the health care services in dispute.

PATIENT CLINICAL HISTORY [SUMMARY]:

Complaint - This lady had an acute onset of right chest pain after an incident that occurred while she was performing her usual job. She was lifting a X when the incident occurred. She was evaluated with a diagnosis of dislocation of the right sterno-clavicular joint. She was treated with physical therapy and activity modification with no improvement .She continued to report episodes of dislocation.

A CT of the right shoulder reported no bony abnormalities in the SC joint.

She then saw XX who reported instability of the SC joint on examination of the right shoulder. The doctor recommended open stabilization of the joint with a fascia graft.

ANALYSIS AND EXPLANATION OF THE DECISION INCLUDE CLINICAL BASIS, FINDINGS, AND CONCLUSIONS USED TO SUPPORT THE DECISION:

The condition is chronic and the claimant has failed routine conservative care including formal therapy and activity modification. The procedure is not discussed in the ODG. However, XX has documented instability of the joint with physical

examination. The medical records show no complaints in the shoulder prior to the compensable injury while reaching for a dog. Therefore, there is a direct causality of the compensable event for the joint instability. The CT shows no fracture or other bony injury. However, physical examination demonstrates instability of the joint with anterior subluxation.

The claimant must understand that this is somewhat an experimental procedure, as these surgeries are not routinely performed. However, stabilization procedures for a chronic dislocation are routine in other joints in the body. In addition, the appropriate coding has been requested, 53530 and 53532. These CPT codes are consistent with the surgical request from the surgeon and are consistent with the medical records.